

01-31-05

3713\$
JFW



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of:)	Examiner: Unknown
)	
Eugene Thomas Bond)	Group Art Unit: 3713
)	
Serial No. : 09/720,042)	
)	
Filed: May 6, 2004)	EV 436255034 US
)	Express Mail Label No.
For: SOFTWARE VERIFICATION AND)	
AUTHENTICATION)	
)	January 28, 2005
)	Date
)	
)	

PRELIMINARY AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Examiner:

This Amendment is a Preliminary Amendment filed before a First Office Action in the above-identified continuation application. The Applicant respectfully requests that the Preliminary Amendment be entered and considered.

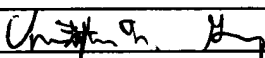
Please amend the application as follows:

02/07/2005 BABRAHA1 00000096 09720042

01 FC:1201

800.00 OP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the consolidated Appropriates Act, 2005 (H.R. 4818).		Complete if Known					
<div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> PTO FEE TRANSMITTAL for FY 2005 JAN 28 2005 </div>		Application Number	09/720,042				
		Filing Date	May 6, 2004				
		First Named Inventor	Eugene Thomas Bond				
		Examiner Name	Unknown				
		Art Unit	3713				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	16379US01 (04560-0009)				
TOTAL AMOUNT OF PAYMENT (\$) 800							
METHOD OF PAYMENT (check all that apply)							
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>13-0017</u> Deposit Account Name: <u>McAndrews Held & Malloy</u> For the above-identified deposit account, the Director is hereby authorized to (check all that apply)							
<input type="checkbox"/> Charge Fee(s) indicated below <input type="checkbox"/> Charge Fee(s) indicated below, except for the filing fee							
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fees(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
							<u>Small Entity</u>
							<u>Fee (\$)</u> <u>Fee (\$)</u>
Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent							50 25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200 100
Multiple dependent claims							360 180
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
36		-67		0 x 50 =		0	
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
6		-2		4 x 200 =		800	
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>		<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ -100		_____ /50		_____ (round up to a whole number)		x _____ =	_____
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							_____
Other: _____							_____
SUBMITTED BY							
Signature				Registration No. (Attorney/Agent)	51,728	Telephone	(312)775-8000
Name (print/type)	Christopher N. George			Date	January 28, 2005		